

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

Novo Nordisk PAC

ADDRESS (number and street)
▼

500 New Jersey Avenue NW

Suite 350

☐Check if different
than previously
reported. (ACC)

Washington

DC

20001

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00424838

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 0

1 6

2 0 0 8

through

1 1

2 4

2 0 0 8

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michael Mawby

Signature of Treasurer

Electronically Filed by Michael Mawby

Date

1 1

3 0

2 0 0 8

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Novo Nordisk PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	6	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	4	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		5097.50
(b) Cash on Hand at Beginning of Reporting Period	9610.87	
(c) Total Receipts (from Line 19)	10478.00	60463.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	20088.87	65560.50
7. Total Disbursements (from Line 31)	12787.50	58259.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7301.37	7301.37
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Novo Nordisk PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	7645.00	41100.00
(i) Itemized (use Schedule A)	2833.00	19363.00
(ii) Unitemized	10478.00	60463.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	10478.00	60463.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10478.00	60463.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10478.00	60463.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	37.50	337.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	37.50	337.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12750.00	57921.63
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12787.50	58259.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12787.50	58259.13

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	10478.00	60463.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10478.00	60463.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	37.50	337.50
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	37.50	337.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Robert K. Anderson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-2-10-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Robert K. Anderson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-2-10-20

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Robert K. Anderson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-4-18-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - North Ameri

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-3-10-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - North Ameri

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-3-10-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Lynn M. Baer

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - North Ameri

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

915.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-5-18-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Patrick H. Baird

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-4-10-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Patrick H. Baird

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-4-10-20

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Patrick H. Baird

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-6-18-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Customer Channel Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	8

Transaction ID: 20081105-5-10-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Customer Channel Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 20081110-5-10-20

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Chester M. Barszcz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Customer Channel Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	8

Transaction ID: 20081121-8-18-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-9-10-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-9-10-20

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Francis P. Bigley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Compliance Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-13-18-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey L. Burt

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Managed Markets/H

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-10-10-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey L. Burt

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Managed Markets/H

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-11-10-20

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey L. Burt

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Managed Markets/H

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-20-18-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Anne P. Cannon

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Clinical/Scientific Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-12-10-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Anne P. Cannon

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Clinical/Scientific Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-13-10-20

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Anne P. Cannon

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Clinical/Scientific Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-22-18-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Marcus E. Carr

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Director - Hemophilia

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-13-10-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Marcus E. Carr

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Director - Hemophilia

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-14-10-20

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Marcus E. Carr

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Director - Hemophilia

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-24-18-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Scott P. Cassidy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Information Technology Secur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-14-10-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Scott P. Cassidy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Information Technology Secur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-15-10-20

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Scott P. Cassidy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Information Technology Secur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-25-18-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kenneth P. Chambless

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-15-10-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Kenneth P. Chambless

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-16-10-20

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Kenneth P. Chambless

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-27-18-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Sean P. Clements

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Media Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-18-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Sean P. Clements

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Media Relations

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-29-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Sr Director - Quality Assurance

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-18-10-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Sr Director - Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 20081110-19-10-20

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jane R. Conlon-Werner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Sr Director - Quality Assurance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: 20081121-30-18-0

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Information

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: 20081105-20-10-18

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Information

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-21-10-20

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Henry W. Cortina

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Information

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-32-18-0

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

John E. Davis

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-22-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

John E. Davis

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-25-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

John E. Davis

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-37-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Kim B. Elston

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Government Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-23-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kim B. Elston

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Government Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-26-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Kim B. Elston

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Government Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-40-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Joann A. Fawaz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-24-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joann A. Fawaz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-27-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joann A. Fawaz

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Growth Hormone Therapy Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-41-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-29-10-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-33-10-20

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey A. Frazier

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-48-18-0

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Seth C. Freund

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-30-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Seth C. Freund

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-34-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Seth C. Freund

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-49-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Edith D. Garrow

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Business Relationship

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-31-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edith D. Garrow

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Business Relationship

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-35-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Edith D. Garrow

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Business Relationship

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-51-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Robert D. Gawlikowski

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-32-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Robert D. Gawlikowski

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-36-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Robert D. Gawlikowski

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-52-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Stephen W. Gilligan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior District Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-33-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Stephen W. Gilligan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior District Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-37-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Stephen W. Gilligan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior District Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-53-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Reza Green

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Intellectual Property Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-35-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Reza Green

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Intellectual Property Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 20081110-39-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Reza Green

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Chief Intellectual Property Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: 20081121-55-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Sharon J. Haggerty

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: 20081105-36-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Sharon J. Haggerty

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-40-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Sharon J. Haggerty

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-57-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Samantha D. Hall

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-37-10-18

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

55.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Samantha D. Hall

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-41-10-20

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Samantha D. Hall

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-58-18-0

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Edward F. Hanover

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Corporate Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-59-18-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Medical Scientific Director - M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-39-10-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Medical Scientific Director - M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-43-10-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Kristin L. Hanson

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Medical Scientific Director - M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-60-18-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

John W. Hart

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-40-10-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

John W. Hart

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-44-10-20

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

John W. Hart

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-61-18-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Tanya L. Hill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Brand Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-42-10-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Tanya L. Hill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Brand Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-46-10-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Tanya L. Hill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Brand Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-63-18-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Scott W. Hocking

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Government Accounts (State)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-43-10-18

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Scott W. Hocking

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Government Accounts (State)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-47-10-20

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Scott W. Hocking

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Government Accounts (State)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-64-18-0

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-44-10-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-48-10-20

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Julia L. Hoff

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-65-18-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Todd D. Hughes

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Government Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-46-10-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Todd D. Hughes

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Government Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-50-10-20

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Todd D. Hughes

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Government Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-67-18-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Sean P. Hurley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Car

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-47-10-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Sean P. Hurley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Car

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-51-10-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Sean P. Hurley

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Car

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-68-18-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Elizabeth G. Ingram

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Mar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-48-10-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Elizabeth G. Ingram

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Mar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-52-10-20

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Elizabeth G. Ingram

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Managed Mar

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-70-18-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-49-10-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-53-10-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jesper K. Jensen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-72-18-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Sales Force

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-50-10-18

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Sales Force

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-54-10-20

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

J. P. Jones

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Sales Force

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-74-18-0

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-52-10-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-56-10-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joseph F. Kelly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-77-18-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Donald A. Kempin

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-53-10-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Donald A. Kempin

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-57-10-20

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Donald A. Kempin

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-78-18-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Carol L. Krause

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Clinical/Scientific Liaison

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-58-10-20

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Carol L. Krause

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Clinical/Scientific Liaison

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-79-18-0

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Kendell K. Lebray

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: d3c621dcf314fef8

Amount of Each Receipt this Period

480.00

SUBTOTAL of Receipts This Page (optional)

540.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Camille C. Lee

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Diabetes Brand Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-55-10-18

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Camille C. Lee

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Diabetes Brand Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-59-10-20

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Camille C. Lee

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Diabetes Brand Market

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-80-18-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeffrey P. Letourneau

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	8

Transaction ID: 20081105-57-10-18

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey P. Letourneau

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 20081110-61-10-20

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Jeffrey P. Letourneau

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	8

Transaction ID: 20081121-82-18-0

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Howard Levy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Clinical Re

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-58-10-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Howard Levy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Clinical Re

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-62-10-20

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Howard Levy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Clinical Re

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-83-18-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Charles J. Maerzke

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-59-10-18

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Charles J. Maerzke

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-63-10-20

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Charles J. Maerzke

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Strategic Account Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-84-18-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-61-10-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-65-10-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Michael L. Mawby

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-86-18-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-62-10-18

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-66-10-20

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Jeff S. Maxwell

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-87-18-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Mary Ann McElligott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Regulatory

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-68-10-20

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Mary Ann McElligott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Regulatory

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-89-18-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-65-10-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-69-10-20

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Stephen B. McGill

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-90-18-0

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Christopher N. McGowen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-66-10-18

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher N. McGowen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-70-10-20

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Christopher N. McGowen

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-91-18-0

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Heather L. Millage

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Brand Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-67-10-18

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Heather L. Millage

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Brand Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-71-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Heather L. Millage

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Brand Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-92-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Joseph Miller

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-68-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Miller

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-72-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joseph Miller

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Account Executive

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-93-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Global Chief Medical

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-69-10-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Global Chief Medical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-73-10-20

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Alan C. Moses

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Global Chief Medical

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-95-18-0

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Catherine A. Mullooly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Clinical/Scientific Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-70-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Catherine A. Mullooly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Clinical/Scientific Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-74-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Catherine A. Mullooly

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Clinical/Scientific Liaison

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-96-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Kathleen L. Mulrone

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Applications Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-71-10-18

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Kathleen L. Mulrone

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Applications Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 20081110-75-10-20

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Kathleen L. Mulrone

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Applications Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: 20081121-97-18-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Deputy Gene

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: 20081105-72-10-18

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Deputy Gene

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	8

Transaction ID: 20081110-76-10-20

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Curtis G. Oltmans

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Vice President - Deputy Gene

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	8

Transaction ID: 20081121-98-18-0

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Dylan M. Pensabene

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	8

Transaction ID: 20081105-74-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Dylan M. Pensabene

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-78-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Dylan M. Pensabene

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-100-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Sean P. Phillips

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-75-10-18

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Sean P. Phillips

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Regional Business Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: 20081121-101-18-0

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: 20081105-76-10-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affair

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 20081110-79-10-20

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Christopher M. Porter

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-103-18-0

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-78-10-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-81-10-20

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Linda S. Reyle

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-107-18-0

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Laura L. Riedy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior District Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-79-10-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Laura L. Riedy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior District Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-82-10-20

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Laura L. Riedy

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior District Business Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-108-18-0

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Contract Management & Compl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-82-10-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Contract Management & Compl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-85-10-20

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joanne L. Sadowsky

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Contract Management & Compl

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-111-18-0

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

C. Reed Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-83-10-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

C. Reed Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-87-10-20

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

C. Reed Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Government Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-113-18-0

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Jane E. Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Hormone Replacement Therapy Regional B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-84-10-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Jane E. Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Hormone Replacement Therapy Regional B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-88-10-20

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jane E. Scott

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Hormone Replacement Therapy Regional B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-114-18-0

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-85-10-18

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Government Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-89-10-20

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Lauren E. Semeniuk

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Government Affairs

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1010.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-115-18-0

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Legal/Government & Qu

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-86-10-18

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Legal/Government & Qu

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-90-10-20

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

James Shehan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Legal/Government & Qu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-116-18-0

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Fannie E. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Clinical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 7 / 2 0 0 8

Transaction ID: 1c525ab0f74a47fa277

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-87-10-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

430.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	8

Transaction ID: 20081110-91-10-20

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Karen D. Smith

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Biopharmaceuticals Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	8

Transaction ID: 20081121-118-18-0

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Joann C. Sufalko

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Sample Administra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	8

Transaction ID: 20081105-89-10-18

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Joann C. Sufalko

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Sample Administra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-93-10-20

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Joann C. Sufalko

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Associate Director - Sample Administra

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-121-18-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Lisa G. Suttner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Regulatory

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-90-10-18

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Lisa G. Suttner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Regulatory

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-94-10-20

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Lisa G. Suttner

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Director - Regulatory

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-122-18-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Jennifer L. Tondu

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-93-10-18

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Jennifer L. Tondu

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-97-10-20

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Jennifer L. Tondu

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

District Business Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-127-18-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Clinical Director - Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-94-10-18

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Clinical Director - Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-98-10-20

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Bartholomew J. Tortella

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Clinical Director - Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-128-18-0

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Michael Vargas

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Business Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-95-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Michael Vargas

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Business Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-99-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Michael Vargas

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Manager - Business Analysis

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-129-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Dana G. Vaughns

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Institutional District Business Manage

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-96-10-18

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Dana G. Vaughns

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Institutional District Business Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-100-10-20

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Dana G. Vaughns

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Institutional District Business Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-130-18-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Deena M. Ward

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-98-10-18

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Deena M. Ward

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-102-10-20

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Deena M. Ward

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-132-18-0

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Ellene S. Whitmore

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Biopharmaceuticals Sales Man

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-99-10-18

Amount of Each Receipt this Period

-30.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Ellene S. Whitmore

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Executive Biopharmaceuticals Sales Man

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-133-18-0

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Intellectual Property Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-100-10-18

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Intellectual Property Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-103-10-20

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Rosemarie R. Wilk-Orescan

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Senior Intellectual Property Counsel

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-134-18-0

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Biopharmaceuticals

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-101-10-18

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Biopharmaceuticals

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-104-10-20

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Edward L. Williams

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - Biopharmaceuticals

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1265.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-135-18-0

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

Bill S. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-102-10-18

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

Bill S. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-106-10-20

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Bill S. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Account Executive II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-137-18-0

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - National Sales/Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 8

Transaction ID: 20081105-103-10-18

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - National Sales/Manage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: 20081110-105-10-20

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 87

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)

Pamela H. Young

Mailing Address 100 College Rd. W

City

Princeton

State

NJ

Zip Code

08540-6658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Novo Nordisk

Occupation

Vice President - National Sales/Manage

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 4 / 2 0 0 8

Transaction ID: 20081121-136-18-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

7645.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 81 / 87

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Wachovia

Mailing Address 444 N Capitol Street NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Bank Fee Oct 2008

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: f47c8443bc3217038e4

Date of Disbursement

11 / 12 / 2008

Amount of Each Disbursement this Period

37.50

SUBTOTAL of Disbursements This Page (optional) ►

37.50

TOTAL This Period (last page this line number only) ►

37.50

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 82 / 87

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial)
Bob Etheridge for Congress Committee

Mailing Address Post Office Box 28001

City Raleigh State NC Zip Code 27611

Purpose of Disbursement
Contribution

Candidate Name
Bob Etheridge

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: NC District: 02

Transaction ID: 16388-5783960223197

Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

750.00

B. Full Name (Last, First, Middle Initial)
Citizens for Harkin

Mailing Address PO Box 811

City Des Moines State IA Zip Code 50304

Purpose of Disbursement
Contribution

Candidate Name
Tom Harkin

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District:

Transaction ID: 16388-0689203143119

Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Congressman Joe Barton Committee, the

Mailing Address PO Box 1444

City Ennis State TX Zip Code 75120

Purpose of Disbursement
Contribution

Candidate Name
Joe Barton

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 06

Transaction ID: 16388-3772394061088

Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Dave Wu for Us Congress	Transaction ID: 16388-3340570330619 Date of Disbursement																				
Mailing Address 818 SW Third Ave. #1182	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	8												
City Portland State OR Zip Code 97204	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name David Wu	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Friends of Chris Dodd	Transaction ID: 16388-9733087420463 Date of Disbursement																				
Mailing Address PO Box 270701	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	7		2	0	0	8												
City West Hartford State CT Zip Code 06127	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Christopher J. Dodd	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Friends of John Barrow	Transaction ID: 16388-7139398455619 Date of Disbursement																				
Mailing Address PO Box 8166	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	7		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	7		2	0	0	8												
City Savannah State GA Zip Code 31412	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name John Jenkins Barrow	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Kennedy for Senate 2012	Transaction ID: 16388-5706140398979 Date of Disbursement																				
Mailing Address 501 Capitol Court NE Suite 100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	8												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Edward M. Kennedy	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Lance for Congress	Transaction ID: 76038-3841058611869 Date of Disbursement																				
Mailing Address PO Box 225	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	9		2	0	0	8												
City Colonia State NJ Zip Code 07067	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Leonard Lance	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Linda Stender for Congress	Transaction ID: 16388-6654168963432 Date of Disbursement																				
Mailing Address PO Box 730	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	8												
City Scotch Plains State NJ Zip Code 07076	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name Linda Stender	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A. Full Name (Last, First, Middle Initial) Murtha for Congress Committee	Transaction ID: 16388-9707757830619 Date of Disbursement
Mailing Address Suite 120 551 Main Street Bt Financial Plaza Suite 220	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 8 / 2 0 0 8</div> </div>
City Johnstown State PA Zip Code 15901	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name John P. Murtha	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 12	
B. Full Name (Last, First, Middle Initial) National Republican Congressional Committee	Transaction ID: 16388-1084253191947 Date of Disbursement
Mailing Address 320 First Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 7 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1000.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	
C. Full Name (Last, First, Middle Initial) Richard E Neal for Congress Committee	Transaction ID: 16388-7689020037651 Date of Disbursement
Mailing Address 76 Magnolia Terrace	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 7 / 2 0 0 8</div> </div>
City Springfield State MA Zip Code 01108	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>500.00</div>
Candidate Name Richard E. Neal	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MA District: 02	

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Novo Nordisk PAC

A.

Full Name (Last, First, Middle Initial)
Stabenow for Us Senate

Mailing Address PO Box 4945

City East Lansing State MI Zip Code 48826

Purpose of Disbursement
Contribution

Candidate Name
Deborah Stabenow

Office Sought: ☐ House
☒ Senate
☐ President

State: MI District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 16388-9734918475151

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Texans for Senator John Cornyn Inc

Mailing Address 6850 Austin Centre Blvd
Suite 180

City Austin State TX Zip Code 78731

Purpose of Disbursement
Contribution

Candidate Name
John Cornyn

Office Sought: ☐ House
☒ Senate
☐ President

State: TX District:

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 16388-7119867205619

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

12750.00

Image# 28934518500

Form/Schedule: **F3X**

Transaction ID:
